

Express Mail Label No. (if applicable)

<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b>		<b>RECEIVED CENTRAL FAX CENTER APR 2 2006</b>
Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		Application No. 10/614,148 Filing Date July 7, 2003 First Named Inventor WILLAERT Group Art Unit 1774 Examiner Name Thompson, Camie S. Attorney Docket No 223468 Client Reference No SPGN01029A OCONOLAMP DIV

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

## 1. Submission required under 37 CFR 1.114

- a.  Previously submitted
  - i.  Consider the amendment(s)/reply under 37 CFR 1.118 previously filed on \_\_\_\_\_ (Any unentered amendment(s) referred to above will be entered.)
  - ii.  Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
  - iii.  Other: \_\_\_\_\_
- b.  Enclosed
  - i.  Amendment/Reply
  - ii.  Affidavit(s)/Declaration(s)
  - iii.  Information Disclosure Statement (IDS)
  - iv.  Form PTO-1449
  - v.  Copies of References listed in Form PTO-1449 (except for U.S. patents and applications)
  - vi.  Other: \_\_\_\_\_

## 2. Miscellaneous

- a.  Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.)
- b.  Applicant claims small entity status. See 37 CFR 1.27
- c.  Other: \_\_\_\_\_

## 3. Fees. The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a.  Please charge Deposit Account No. 12-1216 in the total amount indicated below. A duplicate copy of this transmittal sheet is enclosed herewith.

- i.  RCE fee of \$790.00 (large entity) required under 37 CFR 1.17(e)
- ii.  One-month extension of time fee of \$120.00
- iii.  An extension for \_\_\_\_\_ has already been secured and the fee paid therefor of \$ \_\_\_\_\_ is deducted from the total fee due for the total amount of extension now requested.
- iv.  Petition for an extension of time (including the period noted above, if checked), as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fees.
- v.  Suspension of action fee of \$130.00 (37 CFR 1.17(l))
- vi.  Other: \_\_\_\_\_
- vii.  Claim fee

\$790.00

CLAIM FEE	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADD'L CLAIM FEE	RATE	ADD'L CLAIM FEE
TOTAL	23	MINUS	24	=	x 25=	\$	x 50=	\$
INDEPENDENT	10	MINUS	12	=	x 100=	\$	x 200=	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE CLAIM					+ 180=	\$	+ 360=	\$

Claim fee total

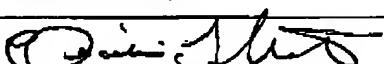
\$790.00

- b.  The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216

In re Application of WILLAERT  
Application No. 10/614,148

**REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL  
(CONTINUED)**

<b>SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED</b>			
Name (Print/Type)	Christopher T. Griffith	Registration No. (Attorney/Agent)	33,392
Signature		Date	April 24, 2006
Address	Leydig, Voit & Mayer Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-8780	Phone	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)

<b>MAILING/TRANSMISSION CERTIFICATE UNDER 37 CFR 1.8 OR 1.10</b>			
<p>I hereby certify that this document and all accompanying documents are, on the date indicated below, being <input type="checkbox"/> deposited with the U.S. Postal Service using "Express Mail" service in an envelope addressed in the same manner indicated on this document with Express Mail Label Number <input type="checkbox"/> , <input type="checkbox"/> deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed in the same manner indicated on this document, or <input checked="" type="checkbox"/> facsimile transmitted to the U.S. Patent and Trademark Office at fax number: (571) 273-8300.</p>			
Name (Print/Type)	Cecilia T. Mateo	Date	April 24, 2006
Signature		Date	April 24, 2006

Page 2 of 2

RCE Transmittal (Revised 4/8/05)